

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Steven C. Sims

Application No.:

09/466,512

Filed:

12/17/1999

Title:

ARCHERY BOWS

Group Art Unit:

3712

Examiner:

Not Assigned

ttorney's Docket No.:

518900-0005

CERTIFICATE OF MAILING

Box Missing Parts Assistant Commissioner for Patents Washington, D.C. 20231

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- (5) a Declaration;
- (6) a Statement Claiming Small Entity Status (Independent Inventor and Small Business Concern);
- (7) an Assignment;
- (8) a certificate of mailing; and
- (9) an itemized return receipt postcard.

Signed at Seattle, Washington this 29th day of February, 2000.

Respectfully submitted,

Steven C. Sims

Lance A. Termes Reg. No. 43,184

Miller Nash LLP

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Fax: (206) 622-7485

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PTO/SB/21 (6-98)
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			Application Number		09/466,512	
TRANSMITTALP		Filing Date		12/17/1999		
	FORM	0 0 0000	First Named Inventor		Sims	
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		ENCLO	SURES (check all that app	oly)		
✗ Fee Transm	nittal Form		nent Papers Application)		After Allowance Communication to Group	
X Fee	Attached	Drawing	ı(s)		Appeal Communication to Board of Appeals and Interferences	
Amendment / Response		Licensii	ng-related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
After Final		Petition and Acc	Routing Slip (PTO/SB/69) companying Petition		Proprietary Information	
Affidavits/declaration(s)		Petition to Convert to a Provisional Application			Status Letter	
Extension of	of Time Request	Power of Change Address	of Attorney, Revocation of Correspondence	X	Additional Enclosure(s) (please identify below):	
Express Ab	pandonment Request	Termina	al Disclaimer		Declaration for Utility Patent Application (37	
Information	Disclosure Statement		ntity Statement		CFR 1.63)	
Certified C	opy of Priority	Remarks	t for Refund			
Response	to Missing Parts/ Application		J			
Res	ponse to Missing					
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or Individual name		Lance A.	Termes Registration	No. 4	3,184	
Signature Summa Lunas						
Date February, 29 2000						
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FEE TRANSMITTAI Complete if Known 09/466,512 **Application Number** for FY 2000 12/17/1999 Filing Date Sims Patent fees are subject to annual revision. First Named Inventor Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. Examiner Name See 37 C.F.R. §§ 1.27 and 1.28. 3712 Group / Art Unit 445.00 TOTAL AMOUNT OF PAYMENT (\$) 518900-0005 Attorney Docket No.

METHOD OF PAYMENT (check one)			FI	EE CALCULA	TION (co	ntinued)		
1. The Commissioner is hereby authorized to charge ADDITIONAL FEES								
indicated fees and credit any overpayments (c)								
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2. X Payment Enclosed: Check Order Other	113 1,8	340* 113	1,840*	Examiner action Requesting public Examiner action	cation of SIR	after		
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1. BASIC FILING FEE	ŀ	70 217		Extension for rep	ly within third	l month		
Large Entity Small Entity Fee Fee Fee Fee Description	118 1,3	860 218	680	Extension for rep	ly within four	th month		
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101 690 201 345 Utility filing fee 380.00	1		150	Notice of Appeal				
106 310 206 155 Design filing fee		00 220		Filing a brief in si	upport of an a	appeal		
107 480 207 240 Plant filing fee		60 221		Request for oral	hearing			
108 690 208 345 Reissue filing fee	138 1,5			Petition to institut	te a public us	e proceeding		
114 150 214 75 Provisional filing fee	140 11		55	Petition to revive	- unavoidable	е		
SUBTOTAL (1) (\$) 380.00		210 241		Petition to revive	- unintention	al		
2. EXTRA CLAIM FEES	142 1,2			Utility issue fee (d	or reissue)			
Fee from Extra Claims below Fee Paid			215	Design issue fee				
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Independent - 3** = X =	122 13	30 122	130	Petitions to the C	ommissioner			
Multiple Dependent	123 5	50 123	50	Petitions related	to provisional	applications		
**or number previously paid, if greater; For Reissues, see below	126 24	40 126	240	Submission of Inf		• •		
Large Entity Small Entity	581 4	40 581	40					
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103 18 203 9 Claims in excess of 20	146 69	90 246	345	Filing a submission (37 CFR § 1.129)		rejection		
102 78 202 39 Independent claims in excess of 3	149 69	90 249	345	For each addition		o be	 	
104 260 204 130 Multiple dependent claim, if not paid				examined (37 CF			l	
109 78 209 39 ** Reissue independent claims over original patent	Other fee (specify)							
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)							
SUBTOTAL (2) (\$) 0	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 65.00							
SUBMITTED BY Complete (if applicable)								
Name (Print Type) Lance A. Termes		gistration orney/Agen		43,184	Telephone		22-8484	
Signature Your Succession					Date	2/29/0	0	

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